

EXHIBIT B(2)

MORTGAGOR INCOME ELIGIBILITY WORKSHEET

The information requested below must be provided with respect to all individuals who are expected to live in the residence being financed. The Internal Revenue Code of 1986, as amended (the "Code"), established geographically-based income limits for recipients of Louisiana Housing Finance Agency Mortgage Loans. The information requested below must be provided in order to enable the Agency to determine your eligibility under these limits for a Mortgage Loan. This information will be used solely to determine your eligibility under the income limits and will not be used for Mortgage Loan underwriting purposes. You must complete this form in addition to the Residential Loan Application because the Code requires that certain sources of income be included when determining income eligibility which you are not required to include when reporting your income for mortgage loan underwriting purposes.

PART I -General Information

Lender:	
Loan No.:	
Mortgagor(s) Name(s):	
Names of Co-Borrowers who will live in the financed residence:	

PART II – Gross Income for Individuals Who Will Live in the Residence Financed

On each line below, include the name, age, relationship and total of all such monthly income if any for **all members of the household:**

	<u>Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Monthly Income</u>
1.	_____	_____	_____	\$ _____
2	_____	_____	_____	\$ _____
3	_____	_____	_____	\$ _____
4	_____	_____	_____	\$ _____
5	_____	_____	_____	\$ _____
6	_____	_____	_____	\$ _____
7	_____	_____	_____	\$ _____
8	_____	_____	_____	\$ _____
			TOTAL MONTHLY INCOME	\$ _____

	<u>At Loan Application</u>	<u>At Closing</u>
Source of Income:		
Gross pay	_____	_____
Overtime and part-time employment	_____	_____
Bonuses	_____	_____
Dividends, interest, royalties and trusts	_____	_____
Business activities or investments	_____	_____
Net Rental Income	_____	_____
Pensions and Social Security benefits	_____	_____
Veterans Administration compensation	_____	_____
Unemployment compensation	_____	_____
Sick pay	_____	_____
Alimony and child support	_____	_____
Public Assistance	_____	_____
Any other	_____	_____

I/we declare under penalty of law that the foregoing representations are true and correct.

(EXECUTION AT CLOSING)
(add additional signature lines if necessary)

Signed, sealed and delivered in the presence of _____, on this _____ day of _____, 20____.

_____ Notary Public	L.S.	_____ Mortgagor
_____ Notary Public	L.S.	_____ Mortgagor
_____ Notary Public	L.S.	_____ Mortgagor